CLAIMS ONLY

Application Number	Filing Date
10/702569	

Applicant(s)

BEST AVAILABLE COPY

10-14-04

* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT	
	Indep	Depend	Indep	Depend	Indep	Depend
1			/			
2				/		
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Total Indep			1			
Total Depend			4			
Total Claims			5			

CLAIMS		Indep	Depend	Indep	Depend	Indep	Depend
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Total Indep							
Total Depend							
Total Claims							